

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: William C. Moyer                      Group Art Unit:  
 Application No.:                                      Examiner:  
 Date Filed:    Batch No.:  
 Title: DATA PROCESSING SYSTEM HAVING INSTRUCTION SPECIFIERS FOR  
 SIMD REGISTER OPERANDS AND METHOD THEREOF

## CERTIFICATE OF MAILING

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO:  
 COMMISSIONER FOR PATENTS ALEXANDRIA, VA. 22313, ON: 9-8-03

Date of Deposit

MOTOROLA INC.

Name of Assignee



SIGNATURE

9-8-03

DATE

## INFORMATION DISCLOSURE STATEMENT (IDS)

Assistant Commissioner For Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

SIR:

In accordance with 37 C.F.R. §1.56 and in compliance with 37 C.F.R. §§1.97 and 1.98, the references listed on attached Form PTO/SB/08 and/or subsequently identified herein, are being submitted herewith for consideration by the United States Patent and Trademark Office. The Office hereby waives the requirement under 37 CFR 1.98 (a)(2)(i) for submitting a copy of each cited U.S. patent and each U.S. patent application publication for all U.S. national patent applications filed after June 30, 2003 and for all international applications that have entered the national stage under 35 USC § 371 after June 30, 2003. See 37 CFR 1.491(b).

I. COPIES

- a. ☒ A legible copy of (i) each foreign patent; (ii) each publication or that portion which caused it to be listed; and (iii) all other information or that portion which caused it to be listed, is included herewith.
- b. ☐ Any patents, publications or other information which are listed on PTO/SB/08 which are not enclosed herewith were previously cited by or submitted to the PTO in one of the following applications which has been relied upon for an earlier filing date under 35 U.S.C. §120:

U.S. Serial NumberU.S. Filing DateII. CONCISE EXPLANATION OF THE RELEVANCE (check at least one box)

- a. ☒ Except as may be indicated below in (b) of this section, all of the patents, publications or other information are in the English language (concise explanation not required).
- b. ☐ A concise explanation of the relevance of all patents, publications or other information listed that is not in the English language is as follows:
- c. ☐ The following additional information is provided for the Examiner's consideration:

III. ☒ CROSS REFERENCE TO RELATED APPLICATION(S)

The Examiner is advised that the following co-pending application(s) contain(s) subject matter that may be related to the present application. By bringing this (these) applications to the Examiner's attention, Applicant(s) does(do) not waive the confidentiality provisions of 35 U.S.C. §122.

| <u>Serial No.</u>          | <u>Filing Date</u>  | <u>Art Unit</u> |
|----------------------------|---------------------|-----------------|
| 09/591,938                 | June 12, 2000       | 2183            |
| Attny Docket No. SC13053TH | Concurrent herewith |                 |
| Attny Docket No. SC13071TH | Concurrent herewith |                 |
| Attny Docket No. SC13075TH | Concurrent herewith |                 |

FEESIV. ☒ THIS IDS IS BEING FILED UNDER 37 C.F.R. §1.97(b): (check one box)

- a. ☒ within three months of the filing date of a national application other than a continued prosecution application under § 1.53(d) (37 C.F.R. §1.97(b)(1)). No fee or statement is required.
- b. ☐ within three months of the date of entry of the national stage as set forth in § 1.491 in an international application (37 C.F.R. §1.97(b)(2)). No fee or statement is required.
- c. ☐ before the mailing date of a first Office Action on the merits (37 C.F.R. §1.97(b)(3)). No fee or statement is required.
- d. ☐ before the mailing date of a first Office Action after the filing of a request for continued examination under § 1.114 (37 C.F.R. § 1.97(b)(4)). No fee or statement is required.

V. ☐ THIS IDS IS BEING FILED UNDER 37 C.F.R. §1.97(c): (check one box)

before the mailing date of any of a Final Office Action under 37 C.F.R. §1.113, a Notice of Allowance under 37 C.F.R. §1.311, or an action that otherwise closes prosecution in the application (See 37 C.F.R. §1.97(c)).

- a. ☐ No statement; therefore, charge Deposit Account 502117 the fee set forth in 37 C.F.R. §1.17(p).
- b. ☐ See the statement below. No fee is required.

VI. ☐ THIS IDS IS BEING FILED UNDER 37 C.F.R. §1.97(d):

on or before payment of the issue fee and is accompanied by the following:

- 1) a statement under 37 C.F.R. §1.97(e) as provided below; and
- 2) charge Deposit Account 502117 the petition fee set forth in §1.17(p).

VII. ☐ STATEMENT UNDER 37 C.F.R. §1.97(e) (check only one box, if applicable)

The undersigned hereby states that

- a. ☐ each item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application not more than three months prior to the filing of IDS; or
- b. ☐ no item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application, and to knowledge of the person signing the statement after making reasonable inquiry, no item of information contained in the IDS was known to any individual designated in 37 C.F.R. 1.56(c) more than three months prior to the filing of this statement, or
- c. ☐ some of the items of information contained in the IDS were cited in a communication from a foreign Patent Office. As to this information, the undersigned states that each item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application not more than three months prior to the filing of this IDS. As to the remaining information, the undersigned hereby states that no item of this remaining information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application or, to the knowledge of the person signing the statement after making reasonable inquiry, no item of information contained in the IDS was known to any individual designated in 37 C.F.R. 1.56(c) more than three months prior to the filing of this statement.

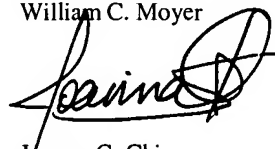
VIII. PAYMENT OF FEES

- ☐ A check in the amount of \_\_\_\_\_ is enclosed for the above-identified fee(s).
- ☐ Please charge Deposit Account **502117** in the amount of \$180.00 for the above-indicated fee(s).
- ☒ If Applicant has overlooked any additional fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit Account **502117**.
- ☐ Two Copies of this paper are attached for Deposit Account charges and debits.

The above references are being cited only in the interests of candor and without any admission that they constitute statutory prior art or contain matter which anticipates the invention or which would render the same obvious, either singly or in a combination, to a person of ordinary skill in the art.

If the Examiner has any questions concerning this IDS, he/she is requested to contact the undersigned. If it is determined that this IDS has been filed under the wrong rule, the PTO is requested to consider this IDS under the proper rule (with a petition if necessary) and charge the appropriate fee to Deposit Account **502117**.

Respectfully submitted,  
William C. Moyer



Joanna G. Chiu  
Attorney for Applicant(s)  
Reg. No. 43,629  
Tel. (512) 996-6839

MOTOROLA, INC.  
Customer Number 23125

Enclosures: ☒ PTO/SB/08  
☒ References (AJ-AN)  
☐ Foreign Search Report  
☐ Other:

|  |   |                          |                  |                        |           |
|--|---|--------------------------|------------------|------------------------|-----------|
| Substitute for form 1449A/PTO<br><br><b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br><br>(use as many sheets as necessary) |   | <b>Complete if Known</b> |                  |                        |           |
|  |   | Application Number       |                  |                        |           |
|  |   | Filing Date              |                  |                        |           |
|  |   | First Named Inventor     | William C. Moyer |                        |           |
|  |   | Group Art Unit           |                  |                        |           |
| Examiner Name  |   |                          |                  |                        |           |
| Sheet  | 1 | of                       | 2                | Attorney Docket Number | SC13074TH |

| U. S. PATENT DOCUMENTS |                       |   |                                |  |  |
|------------------------|-----------------------|---|--------------------------------|--|--|
| Examiner<br>Initials*  | Cite No. <sup>1</sup> | Document Number                           | Publication Date<br>MM-DD-YYYY | Name of Patentee or Applicant<br>of Cited Document | Pages, Columns, Lines, Where Relevant<br>Passages or Relevant Figures Appear |
|                        |                       | Number -Kind Code <sup>2</sup> (if known) |                                |  |  |
|                        | AA                    | US -6,202,130                             | 03-13-20001                    | Scales et al.                                      |  |
|                        | AB                    | US -5,887,183                             | 03-23-1999                     | Agarwal et al.                                     |  |
|                        | AC                    | US -5,764,787                             | 06-09-1998                     | Nickerson  |  |
|                        | AD                    | US -4,744,043                             | 05-10-1988                     | Kloker   |  |
|                        | AE                    | US -4,918,600                             | 04-17-1990                     | Harper et al.                                      |  |
|                        | AF                    | US -5,206,822                             | 04-27-1993                     | Taylor   |  |
|                        | AG                    | US -5,697,788                             | 12-16-1997                     | Ohta   |  |
|                        | AH                    | US -5,719,998                             | 02-17-1998                     | Ku et al.  |  |
|                        | AI                    | US -5,717,947                             | 12-10-1998                     | Gallup et al.                                      |  |
|                        |                       | US -                                      |                                |  |  |
|                        |                       | US -                                      |                                |  |  |
|                        |                       | US -                                      |                                |  |  |
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| FOREIGN PATENT DOCUMENTS  |                       |                           |  |                                |  |   |                |
|---------------------------|-----------------------|---------------------------|--|--------------------------------|--|---|----------------|
| Examine<br>r<br>Initials* | Cite No. <sup>1</sup> | Foreign Patent Document   |  | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines,<br>Where Relevant Passages or<br>Relevant Figures Appear | T <sup>6</sup> |
|                           |                       | Country Code <sup>3</sup> | Number <sup>4</sup> Kind Code <sup>2</sup> (if<br>known) |                                |  |   |                |
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| Examiner<br>Signature |  | Date<br>Considered |  |
|-----------------------|--|--------------------|--|

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation, if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> See Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English Language Translation is attached.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

|  |                        |                          |                  |
|--|------------------------|--------------------------|------------------|
| Substitute for form 1449A/PTO  |                        | <b>Complete if Known</b> |                  |
| <b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br><br><i>(use as many sheets as necessary)</i> |                        | Application Number       |                  |
|  |                        | Filing Date              |                  |
|  |                        | First Named Inventor     | William C. Moyer |
|  |                        | Group Art Unit           |                  |
|  |                        | Examiner Name            |                  |
| Sheet 2 of 2   | Attorney Docket Number | SC13074TH                |                  |

| NON PATENT LITERATURE DOCUMENTS |                       |   |                |
|---------------------------------|-----------------------|---|----------------|
| Examiner Initials*              | Cite No. <sup>1</sup> | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T <sup>2</sup> |
|                                 | AJ                    | WULF, WM. A., "Evaluation of the WM Architecture", ACM ; 7/92; pp 382-390.  |                |
|                                 | AK                    | Related application number 09/591,938 filed June 12, 2000   |                |
|                                 | AL                    | Related application filed concurrently herewith, attorney docket number SC13053TH   |                |
|                                 | AM                    | Related application filed concurrently herewith, attorney docket number SC13071TH   |                |
|                                 | AN                    | Related application filed concurrently herewith, attorney docket number SC13075TH   |                |
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation, if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English Language Translation is attached.

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